Central District Health Department

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INFLUENZA VACCINATION PLAN

October 19, 2000

Central District Health Department's Plan for Influenza Vaccination

Boise, Idaho, 10/16/2000 - Central District Health Department, www.cdhd.org, CDHD's response to delays in supply of influenza vaccine is based on the principle that influenza vaccination programs should give highest priority to persons who are most likely to experience serious complications or life-threatening illness from influenza. In order for this plan to succeed, voluntary cooperation is necessary from everyone.

November 1st CDHD will begin vaccinating persons at high risk from complications from influenza (as listed in the following Centers for Disease Control and Prevention document). Vaccination of persons not at high risk for complications from influenza will be delayed.

We're anticipating further allotments of vaccine later in November. When CDHD is supplied with more vaccine we will update this site to let you know about plans and times for influenza vaccination clinics.

CDC OFFICE OF COMMUNICATION

Centers for Disease Control and Prevention Update on Influenza Vaccine Supply

Update: Flu Vaccine Supply

Updated recommendations from the ACIP in response to delays in supply of influenza vaccine for 2000-01 influenza season

This update provides information on the influenza vaccine supply situation and updated influenza vaccination recommendations by the Advisory Committee on Immunization Practices (ACIP) for the 2000-01 influenza season.

Influenza vaccine supplies that are expected to be distributed this year should be approximately equal to what was distributed last year, but a substantial amount of vaccine will reach providers later than usual. Based on information provided by manufacturers, distribution of approximately 75 million doses is anticipated. This total includes 9 million doses that CDC has contracted with one of the vaccine manufacturers to produce. During last year's influenza season in the United States, approximately 77

million doses of vaccine were distributed, of which 3 million were returned, for a net distribution of 74 million doses. Most vaccine doses usually become available to providers by October, with 99 percent of distributed doses available before December. This year, as many as 18 million doses are expected to be distributed in December.

Because of the potential health impact of delayed flu vaccine availability, CDC and ACIP updated recommendations for the 2000-01 season. The overall goal of these recommendations is to minimize the adverse health impact of delays on high risk persons.

Persons at high risk from complications from influenza are:

Persons aged 65 years and older;

Residents of nursing homes and other chronic-care facilities that house persons of any age who have chronic medical conditions;

Adults and children who have chronic disorders of the pulmonary or cardiovascular systems, including asthma;

Adults and children who have required regular medical follow-up or hospitalization during the past year because of chronic metabolic disease (including diabetes mellitus), kidney dysfunction, blood disorders (hemoglobinopathies), or immunosuppression (e.g., caused by medications or HIV);

Children and teenagers (aged 6 months to 18 years) who are receiving long-term aspirin therapy and therefore might be at risk for developing Reye syndrome after influenza infection;

Women who will be in the second or third trimester of pregnancy during the influenza season.

The recommendations are as follows:

- 1. When influenza vaccine becomes available, vaccination efforts should be focused on persons at high risk of complications associated with influenza disease and on health care workers who care for these persons.
- 2. Temporary shortages because of delayed or partial shipments may require decisions on how to prioritize use of vaccine available early in the season among high-risk persons and health-care workers; such decisions are best made by those familiar with the local situation.
- 3. Mass vaccination campaigns should be scheduled later in the season as availability of vaccine is assured. Given projected vaccine distribution, in most areas, campaigns will be scheduled in November or later. Efforts should be made to increase participation by high-risk persons and their household contacts, but other persons should not be turned away.
- 4. Groups implementing mass vaccination efforts should seek to enhance coverage among those at greatest risk for complications of influenza and their household contacts.
- 5. Special efforts should be undertaken in December and later to vaccinate persons 50-64 years of age, including those who are not at high risk and are not household contacts of high risk persons. Persons in this age group with high risk conditions should be vaccinated along with other high risk persons. Special efforts to vaccinate healthy persons in this age group should begin in December and continue as long as vaccine is available.
- 6. Vaccination efforts for all groups should continue into December and later, as long as influenza vaccine is available. Production of influenza vaccine will continue through December, and providers should plan for how vaccine provided late in the season can be used effectively.

7. Pneumococcal vaccines are recommended by ACIP for many of the same high risk persons as for whom influenza vaccine is recommended. Assuring pneumococcal vaccination of high risk persons early in the influenza season, will confer substantial protection from a major complication of influenza (pneumococcal pneumonia). Pneumococcal vaccine should be administered when indicated even if influenza vaccine is not yet available. Providers should emphasize to patients or their caregivers that pneumococcal vaccination is not a substitute for influenza vaccination and that patients need to return for influenza vaccine when it is available.

The public and private communities will continue to work closely together to ensure the availability of influenza vaccine for the season and to minimize the adverse impact of delays.

For more information about influenza disease and influenza vaccine, visit CDC at www.cdc.gov.

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